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Bib Data Sheet

CONFIRMATION NO. 7837

SERIAL NUMBER 10/619,967	FILING OR 371(c) DATE 07/15/2003 RULE	CLASS 439	GROUP ART UNIT 3766	ATTORNEY DOCKET NO. 59171 (49363)
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APPLICANTS

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**** CONTINUING DATA *******

(Signature) This application is a CIP of 10/192,043 07/10/2002 PAT 6,978,185

**** FOREIGN APPLICATIONS ********none***IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ******** 10/15/2003**

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 10	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance				

ADDRESS

21874

TITLE

Low profile cardiac leads

FILING FEE RECEIVED 402	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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